STATE OF NEW HAMPSHIRE
DEPARTMENT OF JUSTICE
OFFICE OF THE ATTORNEY GENERAL
CHARITABLE TRUSTS UNIT

APPLICATION FOR REGISTRATION/RENEWAL OF FUND RAISING COUNSEL

Type or print in ink. Submit completed application, fully executed bond form (*PFR-7*) in the amount of $10,000.00 and the filing fee in the amount of **$150.00** (payable to the State of New Hampshire) to the Department of Justice, Office of the Attorney General, Charitable Trusts Unit, 33 Capitol Street, Concord, NH 03301-6397.

Registration #_____

1. Name: _____

2. Telephone: _____

3. Address of principal office: _____

4. **Attach** a list of names, addresses and titles of all officers, directors and key employees.

5. Is your organization registered in other states as a professional fundraiser?

    Yes___ No ___   If yes, **attach** a list of all other states.

6. Has the registration of your organization ever been denied, suspended, revoked or enjoined by any state agency or by any court, or are such proceedings pending?

    Yes____ No____ If yes, **attach** a detailed explanation.

7. Do you intend, within the next twelve months, to employ, contract with, arrange for, or otherwise engage any individual or firm (other than a charitable organization) to solicit contributions? Yes_____ No_____

    If yes, **attach** a detailed explanation including the name and address of each such individual or firm.

-OVER-

8. The undersigned acknowledges by execution of this application that this registration

- Does not entitle the registrant to perform any material services for a charitable trust, police, law enforcement, or firefighters' association until the contract and Solicitation Notice (**PFR-5**) pursuant to which services are to be rendered have been approved by the Attorney General.

- Expires one year from the date of issuance **of the surety bond**.

Date:_____   _____
                                                                   Duly Authorized

STATE OF _____
COUNTY OF _____

    Personally appeared the above named _____ and took oath or affirmed that the statements contained in the foregoing application are true to the best of his/her knowledge and belief.

                                        Before me,

                                        _____
                                        Notary Public
                                        My Commission Expires_____